

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

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CITY OF SANTA ROSA  
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NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Sawyer		John	Jay

1. Office, Agency, or Court

Agency Name

Santa Rosa City Council

Division, Board, Department, District, if applicable

Your Position

City Councilmember

► If filing for multiple positions, list below or on an attachment.

Agency: Sonoma County Transportation Authority

Position: Alternate

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☒ County of Sonoma

☒ City of Santa Rosa

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is \_\_\_\_\_, through December 31, 2010.

☐ Leaving Office: Date Left \_\_\_\_\_  
(Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ The period covered is \_\_\_\_\_, through the date of leaving office.

☐ Assuming Office: Date \_\_\_\_\_

☐ Candidate: Election Year \_\_\_\_\_

Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is  
I certify under penalty of perjury under the laws of the State of California that

Date Signed 3/22/2011  
(month, day, year)

Signature

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

John Sawyer

<p>▶ <b>NAME OF BUSINESS ENTITY</b> <u>Bank of America</u></p> <p><b>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</b> <u>Retail Banking/Investment Firm</u></p> <p><b>FAIR MARKET VALUE</b> <input type="checkbox"/> \$2,000 - \$10,000    <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p><b>NATURE OF INVESTMENT</b> <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p><b>IF APPLICABLE, LIST DATE:</b> ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>	<p>▶ <b>NAME OF BUSINESS ENTITY</b> <u>Kinder Morgan Energy Partners</u></p> <p><b>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</b> <u>Natural Gas Distributors (Midwest USA)</u></p> <p><b>FAIR MARKET VALUE</b> <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p><b>NATURE OF INVESTMENT</b> <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p><b>IF APPLICABLE, LIST DATE:</b> ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>
<p>▶ <b>NAME OF BUSINESS ENTITY</b> <u>Bank of America</u></p> <p><b>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</b> <u>Preferred Series H Stock</u></p> <p><b>FAIR MARKET VALUE</b> <input type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p><b>NATURE OF INVESTMENT</b> <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p><b>IF APPLICABLE, LIST DATE:</b> ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>	<p>▶ <b>NAME OF BUSINESS ENTITY</b> _____</p> <p><b>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</b> _____</p> <p><b>FAIR MARKET VALUE</b> <input type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p><b>NATURE OF INVESTMENT</b> <input type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p><b>IF APPLICABLE, LIST DATE:</b> ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>
<p>▶ <b>NAME OF BUSINESS ENTITY</b> <u>Citicorp</u></p> <p><b>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</b> <u>Retail Banking/Investment Firm</u></p> <p><b>FAIR MARKET VALUE</b> <input checked="" type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p><b>NATURE OF INVESTMENT</b> <input checked="" type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p><b>IF APPLICABLE, LIST DATE:</b> ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>	<p>▶ <b>NAME OF BUSINESS ENTITY</b> _____</p> <p><b>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</b> _____</p> <p><b>FAIR MARKET VALUE</b> <input type="checkbox"/> \$2,000 - \$10,000    <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000    <input type="checkbox"/> Over \$1,000,000</p> <p><b>NATURE OF INVESTMENT</b> <input type="checkbox"/> Stock    <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499                                  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p><b>IF APPLICABLE, LIST DATE:</b> ____/____/10    ____/____/10 ACQUIRED                  DISPOSED</p>

Comments: \_\_\_\_\_

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name  John Sawyer

► 1. BUSINESS ENTITY OR TRUST

Sawyers News, Inc.

Name  
PO Box 9598 Santa Rosa, CA 95405

Address (Business Address Acceptable)

Check one  
☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
Retail Sales	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	<u>  </u> / <u>  </u> / <u>10</u> <u>05</u> / <u>31</u> / <u>10</u>
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED    DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> S Corporation    Other	
YOUR BUSINESS POSITION <u>Owner/President</u>	

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

<input type="checkbox"/> \$0 - \$499	<input checked="" type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

\_\_\_\_\_

\_\_\_\_\_

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT    ☐ REAL PROPERTY

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

\_\_\_\_\_

Description of Business Activity or  
City or Other Precise Location of Real Property

\_\_\_\_\_

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	<u>  </u> / <u>  </u> / <u>10</u> <u>  </u> / <u>  </u> / <u>10</u>
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED    DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_ Yrs. remaining    ☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

► 1. BUSINESS ENTITY OR TRUST

\_\_\_\_\_

Name

\_\_\_\_\_

Address (Business Address Acceptable)

Check one  
☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	<u>  </u> / <u>  </u> / <u>10</u> <u>  </u> / <u>  </u> / <u>10</u>
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED    DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	
NATURE OF INVESTMENT	
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> _____ Other	
YOUR BUSINESS POSITION _____	

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

<input type="checkbox"/> \$0 - \$499	<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> \$1,001 - \$10,000	

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

\_\_\_\_\_

\_\_\_\_\_

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT    ☐ REAL PROPERTY

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

\_\_\_\_\_

Description of Business Activity or  
City or Other Precise Location of Real Property

\_\_\_\_\_

FAIR MARKET VALUE	IF APPLICABLE, LIST DATE:
<input type="checkbox"/> \$2,000 - \$10,000	<u>  </u> / <u>  </u> / <u>10</u> <u>  </u> / <u>  </u> / <u>10</u>
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED    DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000	
<input type="checkbox"/> Over \$1,000,000	

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_ Yrs. remaining    ☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

Comments: Sawyers News, Inc. has a value of -0-Closed on 5-31-10

**CALIFORNIA FORM 700**  
**FAIR POLITICAL PRACTICES COMMISSION**

Name John Sawyer

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

NAME OF LENDER* _____ ADDRESS <i>(Business Address Acceptable)</i> _____ BUSINESS ACTIVITY, IF ANY, OF LENDER _____ HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	INTEREST RATE _____ % <input type="checkbox"/> None SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <div style="text-align: right;"><i>Street address</i></div> <div style="text-align: right;">_____ <i>City</i></div> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <div style="text-align: right;"><i>(Describe)</i></div>
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FPPC Form 700 (2010/2011) Sch. C  
FPPC Toll-Free Helpline: 866/275-3772 [www.fppc.ca.gov](http://www.fppc.ca.gov)